

Flight School Applicants Refractive Surgery Fact Sheet (Amended/Updated November 2005)

What: LASIK (laser in-situ keratomileusis) is disqualifying for Army Aviation in accordance with Army regulation 40-501. The purpose of the program at USAARL is to determine whether LASIK surgery should be considered as an option for Army Aviators, specifically new accessions to Army Aviation. The program is designed to screen and monitor individuals entering flight school who have had LASIK. The surgery is not provided as part of the program, therefore if you have not had surgery you are responsible for all the arrangements necessary to receive refractive surgery. LASIK is the only procedure considered for an exception to policy & waiver under this program.

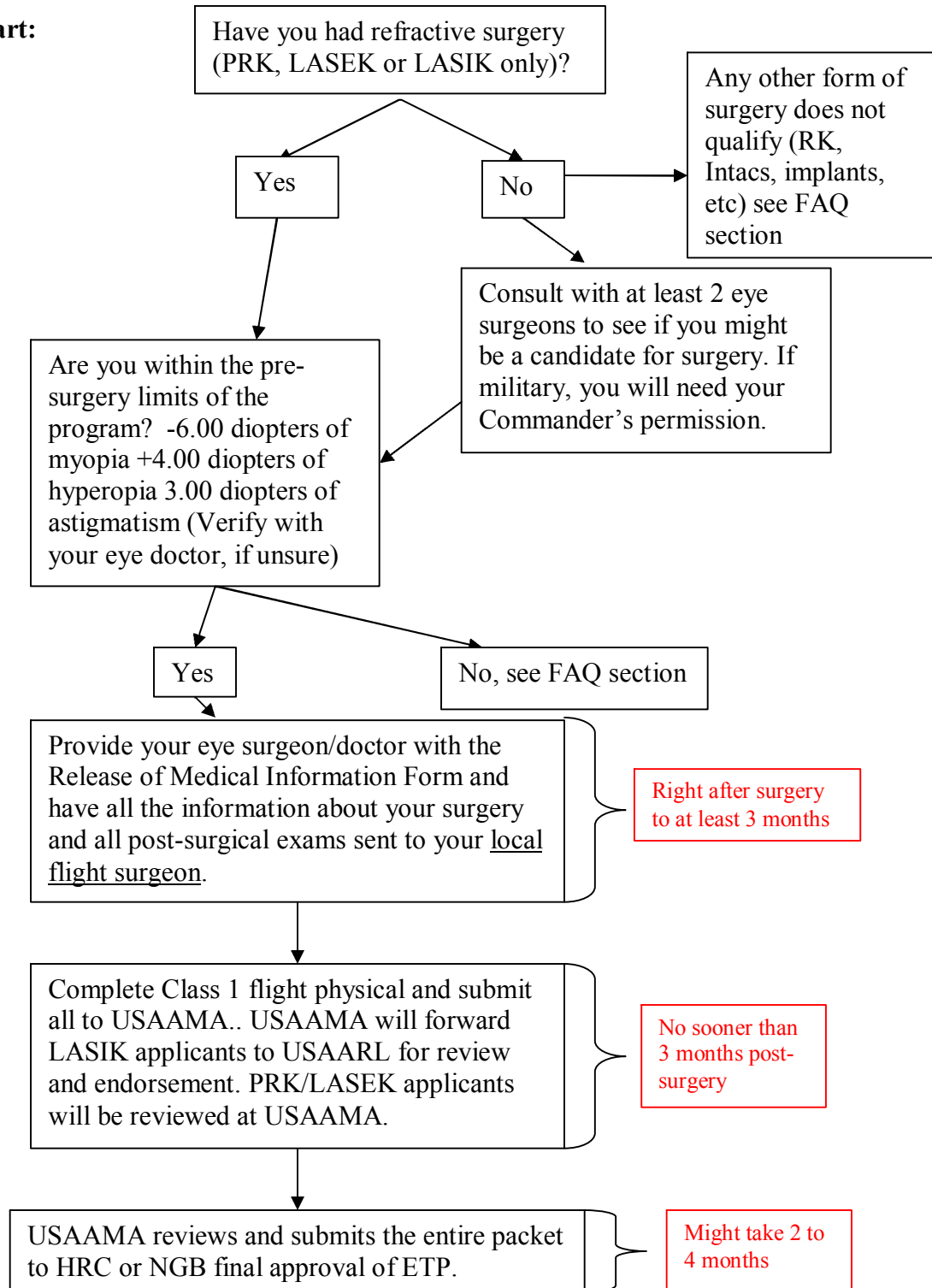
Laser Subepithelial Keratomileusis (LASEK) is considered as a variant of PRK. Both are aeromedically allowed provided the post-surgical outcome meets standards IAW the current Corneal Refractive Surgery APL, revised November 2005. It is important for all applicants to do research on the Internet, or elsewhere, about the differences between the types of surgeries. The US Army Aeromedical Research Laboratory (USAARL) study was initiated in February 2001 and was closed to new applicants as of 1 October 2004. Soon, a decision will be made as to whether LASIK should also be considered for Army Aviation, along side PRK and LASEK. Until such a decision is made, USAARL will continue to see LASIK applicants under a modified protocol set forth by USAARL and accepted by USAAMA.

Who: The program applies to individuals who meet all other requirements for flight school, except for the presence of LASIK. Active duty, Reserve, National Guard, ROTC, Academy cadets, OCS candidates, and civilians are all eligible to submit for an exception to policy for LASIK. Qualifying for an exception to policy does NOT guarantee a flight school slot; it only verifies your medical eligibility to apply for flight school given the presence of a disqualifying procedure. You will need to coordinate with your eye surgeon and/or eye clinic to complete the visual exam forms needed for your exception to policy (see "Release of Medical Information" form). You will need to work with a flight surgeon to complete the Class 1 flight physical. Finally, you will need to work through the standard channels to apply to flight school with your recruiter and/or the Aviation branch.

How, When and Where: This section describes the steps you will need to accomplish in order to receive an exception to policy for LASIK surgery. PRK and LASEK patients should consult their local flight surgeon to complete their flight physical--an exception to policy is no longer needed for these procedures provided the post-surgical outcome is otherwise within standards. Complete the Class 1 flight physical and submit to USAAMA with all of the eye surgery and post-operative reports requested below. USAAMA will forward the LASIK applicants to USAARL for review and endorsement for exception to policy (ETP). The ETP endorsement is returned to the US Army Aeromedical Activity (USAAMA), which reviews that and all other medical information in the Class 1 flight physical. If acceptable, USAAMA will recommend an ETP and submit it to the waiver authority (either HRC or NGB, depending on their status). Once

the exception to policy is approved at the waiver authority, their medical qualification is provided to the board or agency working your flight school application, and you are eligible to compete for the slot. A flow diagram is provided to help you work through the process of obtaining an ETP.

Flowchart:



Points of Contact:

USAARL – Research staff at 334-255-6810/6014

USAAMA – 334-255-7430 http://usasam.amedd.army.mil/_aama/index.htm

Recruiting Command www.usarec.army.mil/hq/warrant/warrant.htm

Warrant Officer Flight Training Program (civilians, NG or Reservists) –
502-626-0467/1554

Active duty (Army, AF, Navy, Marine or Coast Guard) – 502-626-0458

Army Branch Officer applying to aviation needing a branch transfer –

<https://www.perscomonline.army.mil/opavn/Branch%20Transfers.htm>

Aviation Proponency – <http://www-rucker.army.mil/ap/default.htm>

or 334-255-3999/2359

FAQs: After reviewing this section of frequently asked questions and the flowchart, if you still need further clarification, call the Refractive Surgery Research Team at USAARL.

1. Questions about surgery and the eye information needed by USAARL

a. If I had a surgery other than PRK, LASEK or LASIK, can I still get an exception to policy? No, the program only applies to the listed corneal refractive surgery procedures. If you have had radial keratotomy (RK), intrastromal corneal rings (Intacs) or any other type of refractive surgery, you will not qualify for an exception to policy.

b. If I have NOT had refractive surgery yet, what do I do? Follow the steps in the flowchart. You should consult at least 2 eye surgeons before deciding to get surgery. It is also important to do individual research as to the pros and cons of each type of surgery.

c. How can I verify if I meet the limits of the program? Consult with your eye doctor. He/she will review your current eyeglass or contact lens prescription (if you have not had surgery) or records of your eyeglass or contact lens prescription before surgery (if you have already had surgery). Provide your eye doctor with the limits listed in the flowchart to help them in the review (-6.00 diopters myopia, +4.00 diopters hyperopia, or 3.00 diopters astigmatism).

d. My refraction is outside the limits of the program, is it still possible to enter the study? Possibly. The limit is based on the correction that is programmed into the laser, not your eyeglass prescription, so you may actually be within the limits of the program. Your eye surgeon should be able to provide the required laser information to your flight surgeon. They will review the laser records (or the planned correction the surgeon provides you) and determine whether you are within limits.

e. What information do I need to provide about my surgery and where do I get it? All the information needed is listed on the “Release of Medical Information” form. Provide the form to your eye surgeon and/or the eye doctor who is providing your

vision care after surgery. You may have to submit multiple forms to get all of the required information.

1. Surgical Information: Your eye surgeon will need to fill out the information about the laser, the type of surgery and the amount of correction.

2. Manifest Refraction: You will need three post-surgical refractions (measures of any residual prescription) and three visual acuities. This information can be a combination of examinations provided by your surgical center, your optometry office and your flight physical.

3. Corneal Exam: You will need verification that your cornea is clear of haze or any other post-surgical complication. Your eye doctor can provide this information.

4. Corneal Topography: This is the corneal map that shows the shape of your cornea after surgery. You must have a color copy of the map, either mailed, e-mailed, or taken to your flight surgeon. FAX'd versions are not acceptable because they come through in black and white.

5. Contrast Sensitivity: This is a measure of your vision under low contrast conditions (5% is the preferred method). Ask your eye doctor about availability of a contrast sensitivity or low contrast acuity test in your area. Examples of acceptable tests are:

VisTech Contrast Grating Test
Functional Acuity Contrast Test (F.A.C.T.)
Pelli-Robson Contrast Sensitivity Test
Bailey-Lovie 10% low contrast acuity chart
ETDRS low contrast acuity chart (5% is preferred)
Mentor BVAT low contrast acuity chart (set on 5%)

f. What do I do if a contrast sensitivity or low contrast acuity test is not available in my area? Your packet can be processed without this test, **if** the other eye information you provide indicates a good outcome from the surgery (specifically the corneal topography and corneal exam). The principal investigator for the refractive surgery program or your flight surgeon will make this determination and you will be informed if a contrast test is required in your case. Make sure your eye doctor notes on the form that these tests are not available to you.

g. Where do I send all of my information if I've had LASIK? Send all info to USAAMA. Or you can **fax** everything to **334 255-7030 or 7606**, except the corneal topography, which must be in **color** and must be mailed or emailed. Your original flight physical must be sent to this address, faxed to this number, or be verified that it has been entered into the AERO database for flight surgeons.

****ATTENTION ALL APPLICANTS: ALL REQUIRED INFORMATION SENT TO USAAMA/USAARL MUST BE COMPLETE!**** You will be subject to a returned/delayed packet if you do not follow these instructions.

2. Questions about the flight physical

a. How long do I have to wait after surgery to get a flight physical? You should wait at least one month after surgery before starting your flight physical for your vision to stabilize.

b. I already took a flight physical before surgery; do I have to take another physical? No, as long as your initial Class 1 flight physical is still valid (18 months). You **MUST** repeat the eye exam portion of the flight physical after surgery, however. Coordinate this through your flight surgeon and the supporting eye clinic.

c. I have not taken a general military entrance physical yet; do I have to do that first? Yes, if you have not taken the MEPS, ROTC or other entrance physical, you will have to complete that physical before scheduling your flight physical. The entrance physicals require a 90-day waiting period after refractive surgery. Therefore you will have to wait **3 months** after surgery, take the entrance physical, and then you can schedule to take the flight physical. You will have to coordinate this with your recruiter. Go to the link “Refractive Surgery” on the USAARL website (www.usaarl.army.mil) to find the current Army Surgeon General’s policy.

d. I still need to wear glasses after surgery; does that mean I will fail the flight physical? No, as long as you meet the general entry standards for Class 1 which include 20/50 or better uncorrected visual acuity, and no more than –1.50 diopters of myopia or +3.00 diopters of hyperopia or 1.00 diopters of astigmatism. If you are outside of these limits, however, you will not pass your flight physical. You should consult with your eye doctor and flight surgeon if this is the case.

3. Questions about the exception to policy process for LASIK only

a. How long does it take to get an exception to policy approved for LASIK? From the time USAARL/USAAMA submits the ETP request for final approval by HRC or NGB can take up to 4 months. If you are just getting surgery, you will have to add 3 months to that timeline (**7 months**). If you have not had an entrance physical, you may have to add more time (see 2c). ** PRK applicants obtaining a local waiver will have a considerably shorter amount of waiting time.

b. What can I do to speed up the process? Insure that all required paperwork for LASIK is completed and sent directly to USAAMA. This includes the eye information provided by your eye doctor and the flight physical completed by your flight surgeon. If you are National Guard, have your State Aviation Officer contact the NGB to verify with the waiver authority that they want you to become a pilot.

c. What can I do while waiting for the exception to policy to be approved? Complete your flight application so that when the exception to policy is approved at HRC or NGB you will be able to compete for or obtain a flight school slot. Work with your recruiter or the Aviation Branch to complete this part of the process.

4. Questions about the program

a. If I have an exception to policy and a flight school slot, do I still need to participate in the USAARL research program? Yes, if you have had LASIK, one of the conditions of the exception to policy is that your vision is monitored while you are in flight school. If you have had PRK/LASEK, you are not required to participate in this program.

b. What will be expected of me as a participant in the program? You will go through **two** vision exams at USAARL during the course of your flight training. This amount was amended at the end of the actual “study.” You will not be dilated for these exams.

c. What do I do when I get to Ft Rucker for flight school? Before you start flight school, but after finishing WOC or other training, you will contact USAARL at **334-255-6810** to schedule your first eye exam.

d. What if while I’m in flight school a decision is made not to allow individuals with LASIK into flight school? Will I be kicked out? Each individual will be considered on a case-by-case basis. If your vision is good and you are passing flight school, most likely you will be allowed to continue.

e. If I qualify for the program am I guaranteed I spot in flight school? No, qualifying for an exception to policy only waives your disqualification due to the LASIK surgery. All other criteria in the flight physical and for flight school must still be met (including age, flight school eligibility, etc). If you are qualified in all other areas then you can compete for a slot in flight school against all other applicants. Being a participant in the program does not guarantee a slot. For more information about the requirements for flight school contact your Point of Contact for aviation recruiting, this information is above in the Point of Contact section.

Request for Release of Medical Records
(completed by applicant and provided to eye care provider for completion)

From: (enter your information)

Date:

To: (enter eye clinic information)

Subject: Request for records related to refractive surgery procedure

1. I am participating in a research program of refractive surgery in the military. Request a copy of records pertaining to my refractive surgery be provided to your flight surgeon.

2. The following information is needed:

1. Date of procedure
2. Type of procedure (PRK or LASIK)
3. Type of laser (brand name)
4. Ablation parameters (size of ablation zone, microns of tissue removed, number of pulses)
5. Amount of correction (sphere, cylinder and axis)
6. Pre-operative refraction and date (specify manifest or cycloplegic)
7. Follow-up refractions with visual Acuities and dates (most current refraction and as many postoperative refractions as possible)
8. Subjective assessment of corneal clarity (haze)
9. Latest **post-operative** corneal topography in COLOR (instantaneous or tangential corneal maps)
10. Contrast Sensitivity (or low contrast acuity—preferred 5% contrast)

3. Please contact USAAMA/USAARL's POC if you have any questions.

Typed or Printed Name of Applicant

Signature of Applicant

Demographics Required (Applicant to complete):

Last Name: _____ First Name: _____ M.I. _____

Mailing Address: _____

E-mail Address: _____

Home/Cellular Phone: _____

Date of Birth: _____ SSN: _____

Checklist for Eye Care Provider (Surgeon/Doctor to complete below):

Surgeon/Doctor's Name: _____

Clinic Address: _____

Clinic Phone: _____ Clinic Name: _____

Date of Procedure: _____ Type: (circle one) PRK or LASIK

Laser Used: (Manufacturer) _____ (Model#) _____

Ablation Parameters (Complete below, and if available, attach copies of laser printouts)

OD: Size of ablation: _____ mm Tissue removed: _____ microns # of pulses: _____

OS: Size of ablation: _____ mm Tissue removed: _____ microns # of pulses: _____

Amount of correction programmed into laser

OD: _____ OS: _____

Pre-operative Refraction

OD: _____ OS: _____

Did the applicant require any enhancement procedures? Yes _____ No _____

(If yes, provide details as above & below)

Follow-up Examinations (include most recent and 2 prior examinations—3 total)

<u>Date:</u> _____	<u>Refraction:</u> _____	<u>Visual Acuity</u>	<u>Corneal Haze*</u> (circle one)
	OD _____ OS _____	OD _____ OS _____	OD 0 1 2 3 4 OS 0 1 2 3 4
	OD _____ OS _____	OD _____ OS _____	OD 0 1 2 3 4 OS 0 1 2 3 4
	OD _____ OS _____	OD _____ OS _____	OD 0 1 2 3 4 OS 0 1 2 3 4

*Haze 0-4 scale: 0=No Haze, 1=Trace, 2=Minimal, 3-Moderate, 4=Iris details obscured.

Corneal Topography (include a color copy of most recent post-operative corneal topography using the TANGENTIAL or INSTANTANEOUS map display option)

Topographer Manufacturer: _____

Topographer Model: _____

Date of topographies: _____

Contrast Sensitivity (attach copy of post-operative results, if test available)

Test Manufacturer/Model: _____

Date of contrast test: _____

Test Conditions:

Room Lights On? (circle one) Yes No

Backlit Chart? (circle one) Yes No

Distance to Test? _____ m

% Contrast? (if letters) _____ %

Results:

OD: _____

OS: _____

Does applicant report any subjective visual changes? (i.e. increased glare, starbursts, halos, etc.)

***For Class 1A/1W** (MUST complete a post-operative cycloplegic refraction, noting normal refractive DVA/NVA with best correction, and IOP's if your 1A/1W FDME data was pre-operative.)

Distant Vision

Near Vision

OD 20/ _____ Corrected to 20/ _____

20/ _____ Corrected to 20/ _____

OS 20/ _____ Corrected to 20/ _____

20/ _____ Corrected to 20/ _____

Cycloplegic Refraction

OD: _____ OS: _____

Intraocular Tension

OD: _____ OS: _____

Thank you for completing the information. Please return this form and supporting documents to your flight surgeon.